

ISSUE SLIP STAPLE AREA (for additional cross references)

FUNCTION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	EW	11	3/2/00
FORMALITY REVIEW	WM	869	03-12-01
RESPONSE FORMALITY REVIEW	M.H.	625	05-03-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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Best Available Copy